

**ANSWER OF THIRD PARTY RESPONDENT CITATION**

This first section must be filled out by the judgment creditor.

Citation/Respondent: **PayPal, Inc.**

Court Date: April 22, 2020

Defendant's Name: See Attached Schedule

SSN: NA

Case No.: 18-cv-4651

Judgment Balance: \$200,000

This is a Citation: Freeze up to double the Judgment Balance.

**INTERROGATORIES**

1. On the date of service of the citation, did you have in your possession, custody or control any personal property or monies belonging to the judgment debtor? ☒ Yes ☐ No

If the answer is "yes" go to the next question. If "no", go to the instructions.

2. Is this an IRA account? Or have all of the deposits made during the past 90 days been electronically deposited and identified as exempt Social Security, Unemployment Compensation, Public Assistance, Veteran's Benefits, Pension or Retirement or by a source drawing from any other statutory exemptions? Yes ☒ No ☐

If the answer is "yes" go to the next question. If "no", go to the instructions.

3. Is/Are the account(s)' current balance(s) equal to or less than the total of the exempt deposits?

☒ Yes ☐ No

If you answered "yes" to all three (3) questions and funds in the account(s) are exempt, do not freeze the funds. Go to the "instructions" below.

4.	Account Balance	Amount Withheld
A. Savings Account	\$ <u>n/a</u>	\$ <u>n/a</u>
B. Check/MMA/Now Account	\$ <u>n/a</u>	\$ <u>n/a</u>
C. Certificate of Deposit	\$ <u>n/a</u>	\$ <u>n/a</u>
D. Trust Account/Other	\$ <u>\$3,307.45</u>	\$ <u>\$3,307.45</u>

(Describe) Five PayPal accounts

E. Safety Deposit Yes/No **No**F. Land Trust No. n/aG. Less Right of Offset for Loans \$ n/aTotal Amount Frozen: \$ \$3,307.45

5. List all electronic deposits into account(s) and their source(s) except deposits:

Account No.	Source	Monthly Amount
<u>n/a</u>	<u>n/a</u>	\$ <u>n/a</u>
<u>n/a</u>	<u>n/a</u>	\$ <u>n/a</u>
<u>n/a</u>	<u>n/a</u>	\$ <u>n/a</u>

6. List all joint account holders or adverse claimants:

Name n/a Name n/aAddress n/a Address n/a

Account Information:

Type: Checking/Savings/CD Savings

Account Number:

Account Information:

Type: Checking/Savings/CD Savings

Account Number:

**INSTRUCTIONS**

Deliver this Answer at least three (3) days before the court date to assure timely processing.

Complete the Answer of Third Party Respondent Citation section on this form.

Complete and sign the certification at the bottom of this page.

**CERTIFICATION**

Under the penalties as provided by law pursuant to Section 1-109 of the code of Illinois Code of Civil Procedure, the undersigned certifies that the statements set forth in this instrument are true and correct and that I have mailed this Answer to Defendant(s).

Agent Name: Jana NealAgent Title: Legal SpecialistAgent Signature: 